FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 27 AM 10: 55

DOCUMENT # N41449 (2)

1. Corporation Name

IGLESIA BAUTISTA LIBRE RENACER, INC.

Principal Place of Business	Mailing Address
C/O ROSA CAMEJO 1954 S.W. 22ND TERRACE MIAMI FL 33145-3705	944 SE 8TH ST HIALEAH FL 33010-5704 US

2. Principal Place of Business	2a. Mailing Address
21 349 S.W. 12th. STREET	26 S A M E
Suite, Apt. #, etc. 22 ==	Suite, Apt. #, etc. 27 ==
City & State 23 MIAMI, FL.	City & State 28 --
Zip 24 33130 / Country 25 US.	Zip 29 -- / Country 30

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/28/1990
3a. Date of Last Report: 02/02/1994
4. FEI Number: 65-0189834 — ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired [X] — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ — $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes [X] No

9. Name and Address of Current Registered Agent

DE LA PAZ, AMERICA
944 SE 8TH ST
HIALEAH FL 33010

10. Name and Address of New Registered Agent

81 Name: JOSE LUIS RODRIGUEZ
82 Street Address (P.O. Box Number is Not Acceptable): 1751 S.W. 21 TERRACE
83
84 City: MIAMI FL 85 Zip Code 33145

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Jose L. Rodriguez — 01/26/95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) — DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	1.1 TITLE	P./D	XX Change ☐ Addition
NAME	DE LA PAZ, AMERICA	1.2 NAME	RODRIGUEZ, JOSE LUIS	
STREET ADDRESS	944 SE 8TH ST	1.3 STREET ADDRESS	1751 S.W. 21 TERRACE	
CITY-ST-ZIP	HIALEAH FL	1.4 CITY-ST-ZIP	MIAMI, FL. 33145	
TITLE	S	2.1 TITLE	S/D	☐ Change ☐ Addition
NAME	LLINAS, EUNICE	2.2 NAME	LLINAS, EUNICE	
STREET ADDRESS	3690 E 1ST AVENUE	2.3 STREET ADDRESS	3690 E. 1 st. AVE.	
CITY-ST-ZIP	HIALEAH FL	2.4 CITY-ST-ZIP	HIALEAH, FL.33010	
TITLE	T	3.1 TITLE	T/D	XX Change ☐ Addition
NAME	GONZALEZ, NELIDA	3.2 NAME	GONZALEZ, NELIDA	
STREET ADDRESS	1862 SW 24 ST	3.3 STREET ADDRESS	3025 S.W. 15th. STREET	
CITY-ST-ZIP	MIAMI FL	3.4 CITY-ST-ZIP	MIAMI, FL. 33145	
TITLE		4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Jose L. Rodriguez REV. JOSE LUIS RODRIGUEZ PRESIDENT — JAN 26/95 — (305)858-1189
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0037368